







## Wisconsin

# Federal Vision for Streamlining Access to Public Programs

The NWD System's streamlined access to public programs function includes all the processes and requirements associated with conducting formal assessments and/or determining an individual's eligibility for any state administered program that provides LTSS to the NWD System populations. States will use their NWD System to better coordinate and integrate these functions and processes so consumers experience an access process that is seamless and expeditious, and the public's expenditures on administering these access functions are better spent. This brief highlights Wisconsin's promising practice to streamline access to public programs. It will focus on the functional eligibility process and Medicaid financing.

Wisconsin's Successful Promising Practice—Streamlined Access to Public Programs: Functional Eligibility and Medicaid Financing

#### **Functional Eligibility**

Wisconsin's Department of Health and Family Services oversees Medicaid and other health and social service programs. In the late 1990s, they redesigned long term services and supports (LTSS) systems by creating the Family Care Program, a managed care LTSS program. Aging and Disability Resource Centers (ADRCs) were created to become the front door for entry into all LTSS programs for older adults and individuals with physical and developmental disabilities. This gave ADRCs the ability to assess individuals' eligibility for public programs and also provide Person Centered Counseling (PCC) and connect individuals with the full range of supports both private and public. The integration of these tasks has great benefits for streamlined access to supports for consumers.

Wisconsin also implemented a uniform assessment instrument across populations (older adults and individuals with physical and developmental disabilities) and multiple programs (Home and Community-Based Waiver programs, the Program for All Inclusive Care for the Elderly (PACE), and state funded LTSS programs). It is called the Long Term Care Functional Screen (LTCFS). In order to administer the functional screen, individuals must become certified screeners. This process requires passing an on-line certification exam.

For more information please see <a href="https://www.dhs.wisconsin.gov/health-care-coverage/health-care-coverage/family-care-options-long-term-care/wi-functional-screen">https://www.dhs.wisconsin.gov/health-care-coverage/family-care-options-long-term-care/wi-functional-screen</a>.

#### Access to Supports: Experience from Consumer Perspective

There are three steps to becoming eligible for publically funded LTSS in Wisconsin and the ADRC guides consumers through all three steps. For more information see <a href="https://www.dhs.wisconsin.gov/familycare/apply.htm">https://www.dhs.wisconsin.gov/familycare/apply.htm</a>.



#### Resources

- ► <u>Wisconsin ADRC website</u>
- ► <u>Technical Assistance</u> <u>Medicaid Reimbursement</u> <u>Page</u>

#### **Acronyms**

ADRC = Aging and
Disability Resource
Center

FFP= Federal Financial Participation

FMAP = Federal Medicaid Assistance Percentage

LTSS = Long Term
Services and Supports

NWD = No Wrong Door

PCC = Person Centered Counseling

 ADRC staff conducts a functional assessment to determine needs and provides options counseling on various options open to the person, including both public and private options.

**Contact Information** 

- 2. If the person is interested in a Medicaid program, the ADRC will help connect the person with an income maintenance agency to determine financial eligibility. In some cases, the ADRC is co-located with the income maintenance agency. After eligibility is determined ADRC staff provide unbiased counseling and present information on HCBS waiver programs available in their area. The person selects a program and the ADRC assists the person to complete necessary enrollment paperwork. The ADRC will then forward enrollment information to the appropriate program/agency. This process can occur electronically.
- 3. Once the eligibility is determined, if the individuals chooses the Family Care managed care benefit, the ADRC will contact an enrollment consultant who will meet with the person and make sure they understand the managed care benefit. Then the ADRC will complete the enrollment process and notify the managed care organization of the start date.

#### **Medicaid Financing**

Some NWD System activities such as, outreach, application assistance, program planning, training, continuous quality improvement and administrative activities which support functional screening processes are related to the "efficient administration of the (Medicaid) state plan" and are claimable as Federal Financial Participation (FFP). This type of claiming is called Medicaid Administrative Claiming (MAC). In addition, conducting functional eligibility assessments can be reimbursed as Medicaid services through the Federal Medicaid Assistance Percentage (FMAP). For an overview of basic information and definitions of key terms related to Medicaid Administrative Claiming (MAC) please see <a href="FFP Basics">FFP Basics</a>. Wisconsin utilizes both types of Medicaid claiming.

#### **Medicaid Administrative Claiming**

Wisconsin has been claiming Federal Financial Participation (FFP) for ADRCs since 1999. They claim for the following activities as Medicaid administration:

- Medical Administrative Activity Outreach and Eligibility (Medicaid Outreach, Facilitating an Application for Medicaid Program);
- Medical Service Coordination (Referral, Coordination, and Monitoring of Medical Services, Program Planning, Policy Development, and Interagency Coordination Related to Medical Services);
- Functional Screen: Administrative Activity (Input Functional Screen); and
- Functional Screen: Other Activity (Updates to Functional Screen, Functional screen training time, Quality monitoring of LTCFS).

In order to claim administrative funds in-line with federal requirements, ADRCs document the time spent on Medicaid and non-Medicaid related activities. Wisconsin uses a time study methodology to document activities for drawing down FFP. Local sites report 100 percent of all paid time to document time staff work on tasks eligible for Medicaid reimbursement. Although the time study methodology is very labor intensive, the state feels that the benefits outweigh the costs. Each staff person completes a time log spreadsheet on a daily basis tracking all of his or her activities both Medicaid and non-Medicaid related. The Department of Health Services aggregates the time study data on



Contact Information

Contact information will be shared in the final version of this document.

a monthly basis to determine the amount of time dedicated to Medical Assistance (Medicaid) activities.

Additional resources and some of the forms Wisconsin uses are available on the Technical Assistance Exchange Website at <a href="http://www.adrc-tae.acl.gov/tiki-index.php?page=MedicaidFunding">http://www.adrc-tae.acl.gov/tiki-index.php?page=MedicaidFunding</a>

#### **Medicaid Service Claiming**

Wisconsin ADRCs also draw down federal dollars for administering the functional screen (conducting the functional assessment). This is part of their State Medicaid Plan.

### **Identifying No Wrong Door Promising Practices**

No Wrong Door (NWD) Promising Practices are intended to highlight successful state programs providing a model from which NWD Systems can gather strategies and innovations that can augment their own work. A promising practice may be a research or evaluation project, policy analysis, data assessment, outreach initiative, or awareness effort. While Promising Practices are unique to each program, they do offer replicable components for diverse settings and share many common characteristics including the capacity to reach the population of focus, address the aspirations of individuals, drive quality and impact methodology and measurement.